HERITAGE NURSING & REHABILITATION CENTER

1119 NORTH WISCONSIN STREET

PORT WASHINGTON 53074 Ownershi p: Corporati on Phone: (262) 284-5892 Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/01): **54** Yes Total Licensed Bed Capacity (12/31/01): 54 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/01: 53 Average Daily Census: 52 *********************** **************************

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	1/01)	Length of Stay (12/31/01)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	35. 8
Supp. Home Care-Personal Care	No					1 - 4 Years	64. 2
Supp. Home Care-Household Services	No	Developmental Disabilities	1. 9	Under 65	7. 5	More Than 4 Years	0. 0
Day Services	No	Mental Illness (Org./Psy)	39. 6	65 - 74	7. 5		
Respite Care	Yes	Mental Illness (Other)	0. 0	75 - 84	30. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0. 0	85 - 94	49. 1	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	0.0	95 & 0ver	5. 7	Full-Time Equivaler	nt
Congregate Meals	No	Cancer	0. 0	ĺ	ľ	Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	9. 4		100.0	(12/31/01)	
Other Meals	No	Cardi ovascul ar	9. 4	65 & 0ver	92. 5		
Transportation	No	Cerebrovascul ar	17. 0	[`]		RNs	6. 5
Referral Service	No	Di abetes	1. 9	Sex	% j	LPNs	6. 3
Other Services	Yes	Respiratory	3.8		Ì	Nursing Assistants,	
Provi de Day Programming for		Other Medical Conditions	17. 0	Male	15. 1	Aides, & Orderlies	36. 0
Mentally Ill	No			Femal e	84. 9		
Provi de Day Programming for			100.0		j		
Developmentally Disabled	No				100. 0		
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Method of Reimbursement

		Medicare Title 18			edicaid itle 19	-		0ther]	Pri vate Pay	;		amily Care		l	Managed Care			
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0. 0	0	0	0. 0	0	0	0.0	0	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0. 0
Skilled Care	2	100.0	295	35	97. 2	108	0	0.0	0	14	100.0	133	0	0.0	0	1	100.0	270	52	98. 1
Intermedi ate				1	2.8	88	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Di sabl ed				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		36	100.0		0	0.0		14	100.0		0	0.0		1	100. 0		53	100. 0

HERITAGE NURSING & REHABILITATION CENTER

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01							
beachs builing keporeting refrou				% Needi ng		Total			
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of		
Private Home/No Home Health	1.8	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents		
Private Home/With Home Health	0.0	Bathi ng	11.3		58. 5	30. 2	53		
Other Nursing Homes	10. 9	Dressi ng	11. 3		58. 5	30. 2	53		
Acute Care Hospitals	78. 2	Transferring	17. 0		47. 2	35. 8	53		
Psych. HospMR/DD Facilities	0.0	Toilet Use	18. 9		49. 1	32. 1	53		
Reĥabilitation Hospitals	3.6	Eating	37. 7		34. 0	28. 3	53		
Other Locations	5. 5	********	******	******	******	*******	******		
Total Number of Admissions	55	Conti nence		%	Special Treatment	ts	%		
Percent Discharges To:		Indwelling Or Extern	al Catheter	9. 4	Receiving Resp	iratory Care	0. 0		
Private Home/No Home Health	22.0	Occ/Freq. Incontinen	t of Bladder	60. 4	Recei vi ng Trac	heostomy Care	0. 0		
Private Home/With Home Health	10.0	Occ/Freq. Incontinen	t of Bowel	50. 9	Recei vi ng Sucti	i oni ng	1. 9		
Other Nursing Homes	2.0	•			Receiving Osto	my Care	3. 8		
Acute Care Hospitals	0.0	Mobility			Recei vi ng Tube	Feedi ng	5. 7		
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	1. 9	Receiving Mech	anically Altered Diets	22. 6		
Reĥabilitation Hospitals	0.0				9				
Other Locations	20.0	Skin Care			Other Resident C	haracteri sti cs			
Deaths	46. 0	With Pressure Sores		7. 5	Have Advance D	i recti ves	98. 1		
Cotal Number of Discharges		With Rashes		0.0	Medi cati ons				
(Including Deaths)	50				Receiving Psyc	hoactive Drugs	49. 1		

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

************************************* Ownershi p: Bed Size: Li censure: Propri etary 50-99 Skilled Al l Thi s Facility Peer Group Peer Group Peer Group Facilities % Ratio Ratio Ratio Ratio Occupancy Rate: Average Daily Census/Licensed Beds 96.3 77. 1 1. 25 86. 3 1. 12 82.7 1. 16 84.6 1.14 Current Residents from In-County 77.4 82.7 0.94 89. 4 0.87 **85**. 3 0.91 77. 0 1. 00 Admissions from In-County, Still Residing 27.3 19. 1 1.43 19. 7 1.39 21. 2 1.29 20.8 1.31 Admissions/Average Daily Census 105.8 173. 2 0.61 180. 6 0.59 148. 4 0.71 128. 9 0.82 Discharges/Average Daily Census 96. 2 173.8 0.55 184. 0 0.52 150. 4 0.64 130. 0 0.74 Discharges To Private Residence/Average Daily Census 30.8 71.5 0.43 80.3 0.38 **58.** 0 0.53 52.8 0.58 Residents Receiving Skilled Care 98. 1 92.8 1.06 95. 1 1.03 91.7 1.07 85. 3 1. 15 Residents Aged 65 and Older 92. 5 86.6 1.07 90.6 1.02 91.6 87. 5 1.01 1.06 Title 19 (Medicaid) Funded Residents 67.9 71.1 0.95 51.8 1.31 64. 4 1.06 68. 7 0.99 Private Pay Funded Residents 26. 4 13.9 1.91 32. 8 0.81 23.8 22. 0 1. 20 1. 11 Developmentally Disabled Residents 1. 9 1. 3 1.41 1. 3 1. 43 0. 9 2.01 7. 6 0. 25 32. 5 Mentally Ill Residents 39.6 1. 22 32. 1 1. 24 32. 2 1.23 33. 8 1. 17 General Medical Service Residents 17.0 20. 2 0.84 22.8 0.74 23. 2 0.73 19. 4 0.87 49.3 Impaired ADL (Mean) 56. 6 52.6 1.08 50. 0 1. 13 51.3 1. 15 1. 10 Psychological Problems 49. 1 48.8 1.01 55. 2 0.89 50. 5 0.97 51. 9 0.95 Nursing Care Required (Mean) 7. 2 7.3 0.71 5. 2 7.3 0.71 7. 8 0. 66 0.72